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CONFIRMATION NO. 4188

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|-----------------------------|---------------------------------------|--------------|------------------------|---|
| SERIAL NUMBER<br>10/792,205 | FILING DATE<br>03/03/2004<br><br>RULE | CLASS<br>351 | GROUP ART UNIT<br>2873 | ATTORNEY<br>DOCKET NO.<br>CLV-31796B/D1 |
|-----------------------------|---------------------------------------|--------------|------------------------|---|

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/040,106 10/24/2001 PAT 6,746,120  
 which claims benefit of 60/244,253 10/30/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/28/2004

|  |  |                               |                       |                            |
|--|--|-------------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>CA                  | SHEETS<br>DRAWING<br>14       | TOTAL<br>CLAIMS<br>34 | INDEPENDENT<br>CLAIMS<br>9 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |  |                               |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature<br><i>[Signature]</i> | Initials<br><i>[Initials]</i> |                       |                            |

## ADDRESS

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## TITLE

Method and system for ordering customized cosmetic contact lenses

|            |   |   |
|------------|---|---|
| FILING FEE | FEES: Authority has been given in Paper | <input type="checkbox"/> All Fees                       |
|            |   | <input type="checkbox"/> 1.16 Fees ( Filing )           |
|            |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of |